## **Grimes Parks & Recreation De**

Telephone: (515) 986-2143

Fax: (515) 986-3846

www.grimesiowa.gov



## **Art in the Parks**

**NEW! Program Description:** kids will be able to socialize with other kids their age, make arts/crafts, play fun games, and have a little free time on your own at the end. There are different age-appropriate programs set for each day. IF raining, program will be held at the GCC. *Minimum of 6 per class*.

**Who:** Ages 1 - 6 (Must be this age at time of program.)

Where: Local Grimes Parks

**When:** Thursdays at 10:30am – 11:30am

**Dates:** Session 1:

June 7 (Craft - Suncatcher) Lions Park

June 14 (Craft - Father's Day Gift) Waterworks Park

June 21 (Craft - Festive Fan) GCC Park

June 28 (Craft - Stars 'n' Stripes Placemat) Grimes Sports Compl

Questions: Contact Brett Barber, Grimes Parks & Recreation

Director at barber@ci.grimes.ia.us or at 515-986-2143.

To Register: Pre-registration required. Can Register ONLINE at www.grimesiowa.gov OR pay with

cash/check to *City of Grimes* and bring in the registration to the P & R Office located in the Grimes Community Complex on 410 SE Main Street. You can also mail to 410 SE Main St in

Grimes.

**Cost:** \$20 per child per 4-week session OR \$7 drop-in fee

Cut Here			
2012 "Art in the Parks" Registration Form			
PARTICIPANT'S NAME:			AGE:
PARENT/GUARDIAN'S NAME:			
STREET ADDRESS:	CITY:		_ZIP CODE:
I would like to be added to the Grimes Rec Email List:	YES	NO	Already on the List
EMAIL:		PHONE:	

Cost is \$20 per child per 4-week session or \$7 drop-in fee

**Release and Indemnification Agreement:** 

I hereby request that you accept my child's application for registration in this Grimes Park and Recreation Department program. With consideration of your acceptance of my child, I hereby release the City of Grimes, its employees, and the coaches and volunteers associated with this program from all claims which may arise in the event my child is injured in an accident that occurs while he or she is participating in this program. I further agree to indemnify the City of Grimes, its employees, and the coaches and volunteers associated with this program for any claim, which may hereafter be presented on behalf of my child as a result of any such injuries. I hereby acknowledge that it is my responsibility, not the responsibility of the City of Grimes, to provide medical insurance coverage in the event I desire to have medical insurance coverage for my child while he or she participates in this particular activity. I will also allow pictures of my child during this program to be used only for the marketing purposes of future Grimes Parks and Recreation programs.

Signature of Parent or Guardian

Date